

ILLINOIS SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision effective June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+or-)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical		
Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$767,711	+2.3%
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify : No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization) :
Adopting loss costs in NCCI circular IL-2006-11 effective 1/1/07 with company effective date 5/1/07.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

American Fire & Casualty Company

Name of Company

Jennifer Swift Product Staff Underwriter

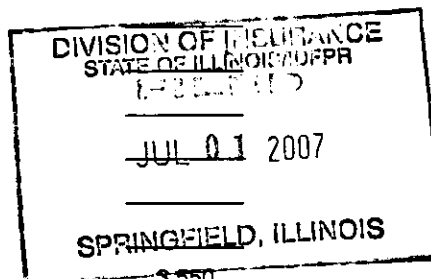
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

07/01/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler & Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers' Compensation	3,550	0.0%
16. Other		



Does filing only apply to certain territory(ies) or certain classes? If so, specify:

no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization.
 Filing to add North American Speciality to the Tier for Worker's Compensation.

* Adjusted to reflect all prior rate changes.

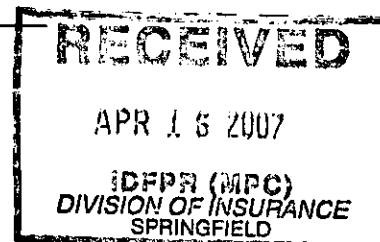
** Change in Company's premium level which will result from application of new rates.

Coregis Insurance Company

Name of Company

Linda Snook, P&RS Specialist

Official -- Title

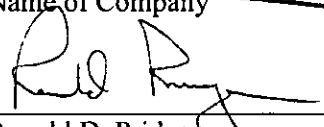


SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective: May 15, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Worker's Compensation	600,000	+1.3%
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territoriesBrief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopted NCCI 01/01/2007 rates and factors. Minimum premium per class.

*Adjusted to reflect all prior rate changes.
 **Change in Company's premium level which
 will result from application of new rates.

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
 MAY 15 2007
 SPRINGFIELD, ILLINOIS
 COUNTRY Casualty Insurance Company
 Name of Company

 Ronald D. Pridgen
 Chief Property/Casualty Actuary
 Official and Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective: May 15, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Worker's Compensation	57,900,000	+0.7%
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adopted NCCI 01/01/2007 rates and factors. Downward deviation of 6% to 15% on selected classes.

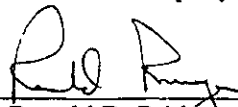
Minimum premium of \$995 for most classes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

COUNTRY Mutual Insurance Company

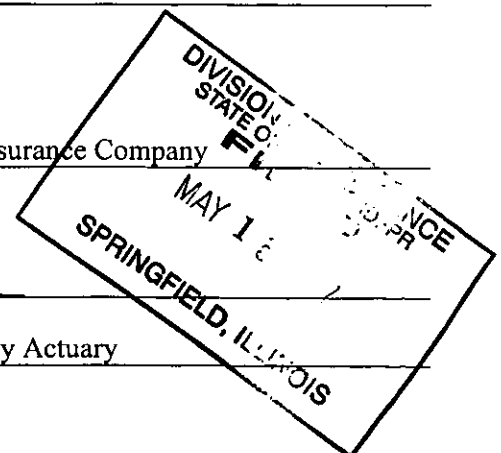
Name of Company



Ronald D. Pridgeon

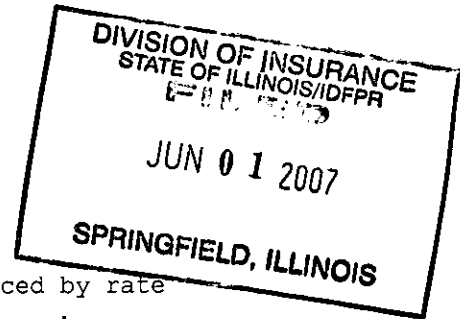
Chief Property/Casualty Actuary

Official and Title



Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 06.01.2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>\$761,067</u>	<u>0.2%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization):

We are filing revisions for all policies effective on and after June 1,
2007. Please delay implementation of the loss costs in NCCI filing (NCCI
Circular Number IL-2006-11).

Our current loss cost multiplier of 1.79 will remain the same.

We are proposing to assign all policies to Hazard Group C. This will not
impact the premium of any current policyholders.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

CUMIS Insurance Society, Inc.

Name of Company

Fredric D Svoboda

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

07/01/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler & Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers' Compensation	5,495,141	0.0%
16. Other		

Does filing only apply to certain territory(ies) or certain classes? If so, specify:

no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization.)
 Filing to add North American Speciality to the Tier for Worker's Compensation.

* Adjusted to reflect all prior rate changes.

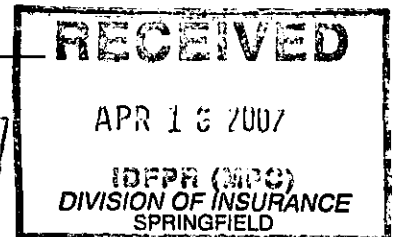
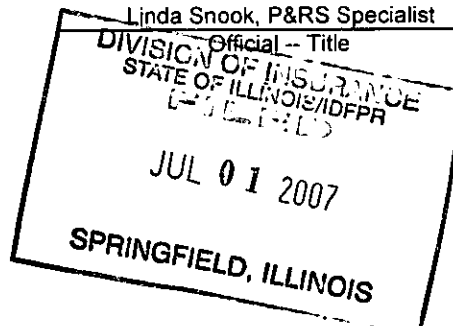
** Change in Company's premium level which will result from application of new rates.

Employers Reinsurance Corporation

Name of Company

Linda Snook, P&RS Specialist

Official -- Title

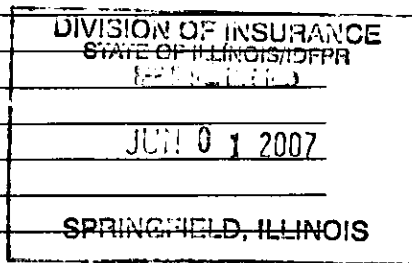


ILLINOIS SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision effective June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+or-)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical		
Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 4,588,521	+3.6%
16. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify : No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization) :
Adopting loss costs in NCCI circular IL-2006-11 effective 1/1/07 with company effective date 5/1/07.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Ohio Casualty Insurance Company

Name of Company

Jennifer Swift Product Staff Underwriter

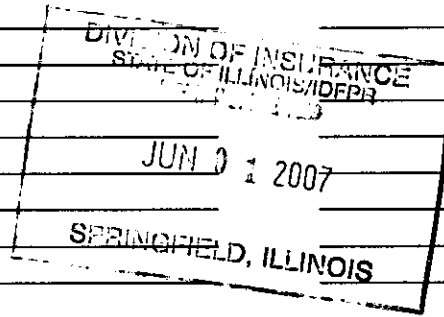
Official - Title

ILLINOIS SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision effective June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+or-)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical		
Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 953,623	+4.3%
16. Other _____		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify : No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization) :
Adopting loss costs in NCCI circular IL-2006-11 effective 1/1/07 with company effective date 5/1/07.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Ohio Security Insurance Company

Name of Company

Jennifer Swift Product Staff Underwriter

Official - Title

RECEIVED

APR - 2 2007

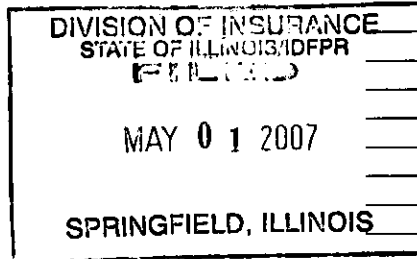
IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 05/01/07.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	249,637	-10.3%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) Filing to utilize
an LCM of 1.375 to be applied to the loss cost effective January 1, 2007 (NCCI
Circular # IL-2006-09) We are currently using the "full Rates" from this circular.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Public Service Mutual Ins. Co.
Name of CompanyWorkers Compensation Analyst
Official — Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 06/01/2007.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>26,821,590</u>	<u>+3.8%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): NCCI

01/01/2007 Advisory rates with class deviations and a flat deviation as listed on
the attachment.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Sentry Insurance A Mutual Company
Name of Company

DENNIS HOMANN - PRODUCT MANAGEMENT SR ANALYST
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 06/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>4,009,181</u>	<u>+0.2%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): NCCI

01/01/2007 Advisory rates with class deviations as listed on the attachment.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Sentry Select Insurance
Name of Company

DENNIS HOMANN - PRODUCT MANAGEMENT SR ANALYST
Official - Title

VISION OF INS.
STATE OF ILLINOIS
FILED

JUN 01 2007

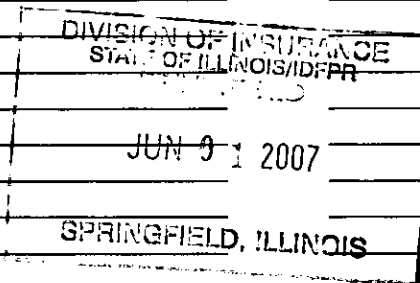
ILLINOIS

ILLINOIS SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision effective June 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical		
Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 4,740,792	+3.6%
16. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify : No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization) :
Adopting loss costs in NCCI circular IL-2006-11 effective 1/1/07 with company effective date 5/1/07.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

West American Insurance Company

Name of Company

Jennifer Swift Product Staff Underwriter

Official - Title

SUMMARY SHEET

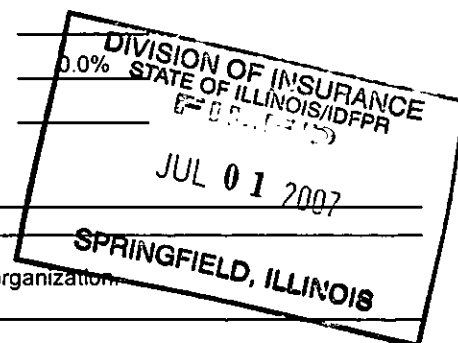
Change in Company's premium or rate level produced by rate revision effective

07/01/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler & Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers' Compensation	25,754,737	
16. Other		

Does filing only apply to certain territory(ies) or certain classes? If so, specify:
no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization.)
Filing to add North American Speciality to the Tier for Worker's Compensation.



* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Westport Insurance Corporation

Name of Company

Linda Snook, P&RS Specialist

Official -- Title

